Physician Ignored Medical History and Symptoms, Causing Woman's Death

\$1 Million Settlement: IGNORING CRITICAL MEDICAL INFORMATION RESULTS IN

WRONGFUL DEATH

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As part of her follow-up therapy, Mrs. A was given the blood thinner Coumadin by her treating physician at the local medical clinic. The Coumadin regimen requires the physician to take regular blood work to determine the clotting times of the blood, in order to gauge the drug's effectiveness. The Coumadin regimen was administered appropriately. Over the next several months, Mrs. A regularly went to her physician's office to have her blood tested and she seemed to recover fully.

On December 4, 1998, Mrs. A's physician decided to stop the Coumadin. No reason was given for this decision. On December 20, 1998, Mrs. A again had a fainting a glass of water. When he returned, he found her unconscious. He took her to the local medical center where she had been treated the previous August. A VQ scan was ordered to definitively rule out the possibility of a pulmonary embolism. The scan revealed a "low probability" for pulmonary embolism. In spite of Mrs. A's other symptoms, the emergency room phy-



sicians did no further testing and discharged her with a diagnosis of acute diarrheal illness.

Two days later Mrs. A had a third fainting episode and an ambulance was called. She arrived at the same local medical center she had been in two days earlier and was immediately diagnosed with a massive pulmonary embolism. Despite heroic efforts of the medical team, Mrs. A's condition deteriorated and she died in the operating room.

Mrs. A is survived by her new husband and her two adult children who were under the age of twenty-five at the time of her death. The family hired attorneys Chris Searcy and Bill Norton

episode in her bathroom. Her husband immediately took her to the local clinic where Mrs. A was evaluated by her treating physician's partner. While there, they reported the entire history of her pulmonary embolism. The physician, however, assured the couple repeatedly that her problems were related to gastroenteritis and mild dehydration.

The next day Mrs. A awoke feeling very short of breath and excessively hot. She asked her husband for

to represent them in arguing that her physicians failed to issue the correct diagnosis. The matter was vigorously contested. The defendant physicians and hospital argued that they had made the correct diagnosis at the time and, further, that Mrs. A had long suffered from a potentially fatal disease, primary pulmonary hypertension. After several years of litigation, this case was settled with all defendants for a total of \$1 million.